

FACILITY EVALUATION REPORT

FACILITY NAME: COURT YARD ESTATES
ADMINISTRATOR: DIMITRI ZAFIRIS
ADDRESS: 27104 FOND DU LAC ROAD
CITY: RANCHO PALOS VERDES
CAPACITY: 6
TYPE OF VISIT: Case Management
MET WITH:

FACILITY NUMBER: 198205250
FACILITY TYPE: 740
STATE: CA **TELEPHONE:** (310) 392-9196
CENSUS: 0 **ZIP CODE:** 90275
UNANNOUNCED **DATE:** 02/20/2019
TIME BEGAN: 12:17 PM
TIME COMPLETED: 01:30 PM

NARRATIVE

1 This report was mailed to licensee via certified mail on 2/20/2019. On March 22, 2018, the
 2 Department concluded a complaint investigation, which alleged that the Licensee failed to keep the
 3 facility free of vermin (rats). During the investigation, the Department determined that the Licensee
 4 failed to provide adequate care and supervision to R1, which resulted in R1 sustaining numerous
 5 pressure injuries, developing severe sepsis, and exposure to rats.
 6
 7 On January 14, 2019 the Licensee was cited for violating California Code of Regulations (CCR) Title
 8 22, § 87466 Observation of the Resident, for neglect by failing to document and bring changes to
 9 the attention of R1's physician and responsible person; CCR Title 22 § 87615 (a)(1) Prohibited
 10 Health Conditions for retaining R1 with stage 3 and 4 pressure injuries; CCR Title 22 § Personal
 11 Rights 87468.2(a) (8) for neglect for failing to uphold resident's rights; and CCR Title 22 §
 12 87211(a)(1)(A)(B) for failing to report the hospitalization and death of R1 to the Department.
 13
 14 The investigation revealed that R1 had history of hospitalization and skilled nursing facility
 15 admissions prior to transfer before being transferred to Courtyard Estates in February of 2016.
 16 Based on the physician's report dated February 22, 2016, R1 had Dementia; Osteoarthritis; required
 17 assistance with all Activities of Daily Living (ADLs); was incontinent of both bladder and bowel; and
 18 was free of skin breakdown. R1 received hospice and palliative care from February 2016 to August
 19 2017. Based on the hospice discharge report, she was discharged from hospice care , because
 20 she was eating better, ; no longer required oxygen, and no discernable skin problems were noted.
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SUPERVISOR'S NAME: Myriam Luga**TELEPHONE:** (323) 980-4932**LICENSING EVALUATOR NAME:** Cheraki Davis**TELEPHONE:** (323) 980-4935**LICENSING EVALUATOR SIGNATURE:**
DATE: 02/20/2019

I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE:**DATE:** 02/20/2019

This report must be available at Child Care and Group Home facilities for public review for 3 years.

FACILITY EVALUATION REPORT (Cont)**FACILITY NAME:** COURT YARD ESTATES**FACILITY NUMBER:** 198205250**VISIT DATE:** 02/20/2019**NARRATIVE**

1 On February 20, 2018 R1 was hospitalized and diagnosed with severe sepsis, pneumonia and toxic
 2 encephalopathy. According to the American Journal of Nursing, sepsis is "*the presence in tissues*
 3 *of harmful bacteria and their toxins, typically through infection of a wound.*" Per the National
 4 Institutes of Health, toxic encephalopathy is "*used to indicate brain dysfunction caused by toxic*
 5 *exposure* ". In addition, R1 was diagnosed with approximately 10 pressure injuries. According to the
 6 Mayo Clinic, "*pressure injuries (pressure ulcers) are injuries to skin and underlying tissue resulting*
 7 *from prolonged pressure on the skin* ." The pressure injuries were staged as followed:
 8
 9 1.Left hip- Deep tissue pressure injury measuring 6 x 7 cm dark- maroon discoloration with partial
 10 thickness skin loss, multiple blisters, periwound intact, small serosanguinous discharge (consisting
 11 of serum and blood – medical-dictionary.com), no malodor
 12 2.Sacral region- Unstageable measuring 7 x 8 x 0.4 cm- full thickness skin loss, wound base 40%
 13 yellow to tan in color and black necrosis, serosanguinous discharge minimal, no malodor.
 14 Periwound is intact, no signs and symptoms of abscess formation.
 15 3.Left heel- Stage 3 - Deep tissue pressure injury measuring 6 x 8 cm- Appears to be ruptured
 16 blister, wound base very dark maroon almost black (40% of the wound base), serosanguinous
 17 discharge minimal, no malodor, periwound intact.
 18 4.Left foot 1st metatarsal-Deep tissue pressure injury measuring 6.5 x 3 cm- partial thickness skin
 19 loss – deep maroon discoloration with partial thickness skin loss, no discharge, periwound intact.
 20 5.Right foot 5th metatarsal- Deep tissue pressure injury measuring 2.5 x 2 cm- maroon discoloration
 21 with partial thickness skin loss, no discharge, periwound intact.
 22 6.Left foot 5th metatarsal- Deep tissue pressure injury measuring 3.5 x 3 cm- maroon discoloration,
 23 no bogginess to the wound palpation, no discharge, periwound intact
 24 7.Left lateral thigh Stage 2 measuring 3.5 x 3 cm- Intact, clear fluid filled blisters.
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1 8.Right upper posterior chest Stage 2- partial thickness skin loss, healing and almost dry, no
 2 discharge, periwound intact.
 3 9.Right medial malleolus Stage 1.
 4 10.Right lateral malleolus Stage 1.

6 On February 22, 2018, R1 was discharged back to Court Yard Estates on hospice care with
 7 diagnoses of Encephalopathy, suspect toxic metabolic etiology secondary to sepsis; sepsis,
 8 leukocytosis (per the Mayo Clinic high white blood), fever, suspect secondary to left lower lobe
 9 pneumonia, with multiple pressure injuries; anemia, no signs and symptoms of bleeding; dementia;
 10 functional paraplegia; upper and lower extremity contractions; and multiple pressure injuries.

12 During the investigation, the Department interviewed Staff 1 who stated that on March 7, 2018, he
 13 observed that R1 was missing skin tissue on her left hand and what appeared to be bite marks on
 14 the arch of her left foot as well as on the pressure injury at the base of the big toe. Staff 1 observed
 15 a rat and rat droppings around R1's blanket.

16 The licensee admitted that rats were observed inside the facility, but stated that he had rectified the
 17 problem.

18 On March 11, 2018 R1 passed away, and the death certificate listed the cause of death as sepsis
 19 and pneumonia.

20 Based on a thorough investigation, which includes observation, interviews, and record reviews, the
 21 Licensee failed to provide proper care and supervision to R1. This resulted in R1 suffering a serious
 22 bodily injury, including the development of numerous pressure injuries between August 2017 and
 23 February 2018 and sustaining rat bites to R1's body, ultimately leading to hospitalization.

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